

Changes to the National Immunisation Programme

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www.immunisation.ie
www.hpv.ie

Objectives

- To describe the new primary childhood immunisation (PCI) schedule
- To discuss the role out of the new changes and information materials available
- To discuss issues relating to the HPV vaccination programme



The New PCI Schedule

All babies born on or after 1st October 2016 will be offered the new PCI schedule

New schedule to start on 1st December 2016
(at 2 months of age)



The New PCI Schedule

Change	When
Addition of meningococcal B (MenB) vaccine	2, 4 and 12 months
Addition of rotavirus vaccine	2 and 4 months
Timing of MenC1	from 4 to 6 months
Timing of PCV3	from 12 to 13 months
Replacement of Hib and MenC with Hib/MenC (2 injections to 1 injection)	13 months



The New PCI Schedule

	Current Schedule		Babies born on or after 1 st October 2016	
Age (months)	Vaccine	No of injections	Vaccine	No of injections
2	6in1 + PCV	2	6in1 + PCV + MenB + Rotavirus	3 + oral vaccine
4	6in1 + MenC	2	6in1 + MenB + Rotavirus	2 + oral vaccine
6	6in1 + PCV	2	6in1 + PCV + MenC	3
12	MMR + PCV	2	MMR + MenB	2
13	MenC + Hib	2	Hib/MenC + PCV	2



The New PCI Schedule

From 1st October 2016 until at least November 2017

2 schedules in place

- the old (current) schedule
- the new schedule



Meningococcal B (MenB) disease

- Caused by *Neisseria meningitidis*.
- Most common and serious clinical presentations
 - meningitis and septicaemia
- An important clinical and public health problem
 - rare but serious
 - disease onset is sudden and often dramatic
- A significant case fatality rate ~10%
- 1 in 10 survivors have long term complications including
 - brain damage, deafness, epilepsy, limb/digit loss, cognitive deficit

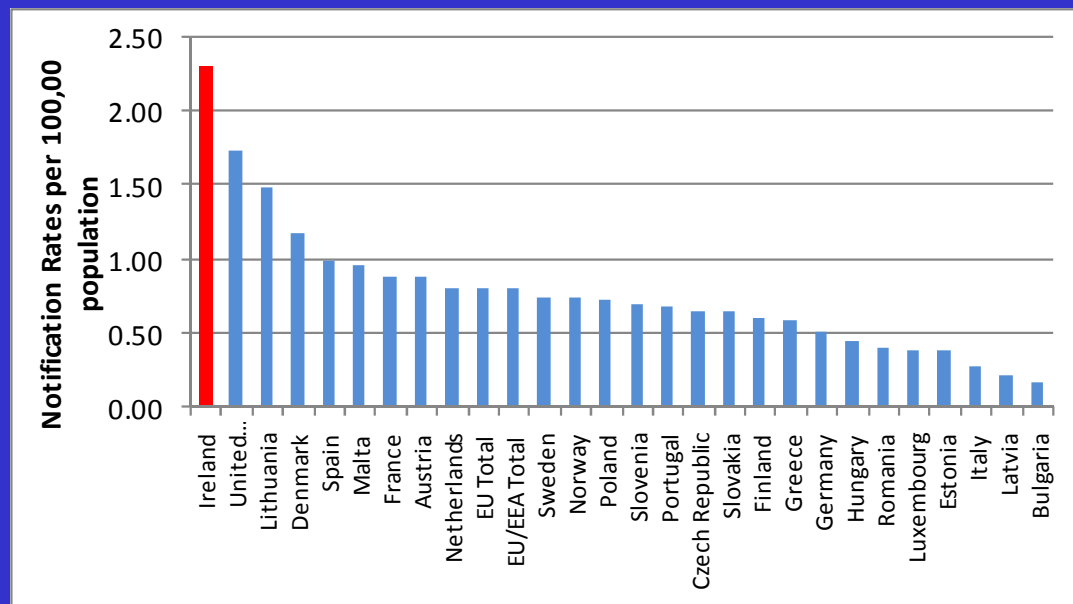


Meningococcal B (MenB) disease

- Most common in infancy and early childhood (0-4 years)
- A second smaller peak of incidence in adolescents and young adults
- Ireland has one of the highest notification rates of invasive meningococcal disease (IMD) in Europe

Confirmed cases in the EU/EEA, 2008-2012

Source: HPSC



MenB Vaccine

- A recombinant multi-component vaccine – Bexsero (GSK)
- **NOT** a live vaccine
- Safe and effective
- ~88% strains covered
- Widely given across Europe
- Introduced into the UK immunisation schedule in 2015
- Schedule
 - 2 + 1 schedule (not 3 +1 as per SmPC)



MenB Vaccine

Contraindications/ Precautions

Contraindications

- Anaphylactic reaction to a previous dose of vaccine
- Anaphylactic reaction to any constituent of vaccine including kanamycin and latex

Precautions

- Acute severe febrile illness
 - defer until well
- Known coagulation defects
 - caution with administration and apply pressure to the vaccine site for 1-2 minutes after vaccination



MenB Vaccine

Side effects

Very Common (1 in 10)

- - Fever ($>38^{\circ}\text{C}$)
 - Tenderness / pain at injection site
 - Skin rash
 - Irritability
 - Vomiting / diarrhoea
 - Unusual crying

Uncommon (1 in 100 to 1 in 1000)

- High fever ($>40^{\circ}\text{C}$)
- Seizures (including febrile seizures)
- Eczema

Rare (1 in 1,000 to 1 in 10,000)

- Urticaria
- Kawasaki's disease



MenB Vaccine

Paracetamol

- Fever with MenB vaccine is a common side effect
- NIAC recommends **all babies** are given 3 doses of paracetamol at the 2 and 4 month MenB vaccines

Liquid Infant Paracetamol (120mgs/5ml)		2 months	4 months
Dose 1	2.5 mls (60mg)	At the time of injection	At the time of injection
Dose 2	2.5 mls (60mg)	4-6 hours after dose 1	4-6 hours after dose 1
Dose 3	2.5 mls (60mg)	4-6 hours after dose 2	4-6 hours after dose 2



MenB Vaccine

Paracetamol

- Will reduce the fever by ~ 50%
- If fever persists a further dose of paracetamol may be given i.e. 4 doses in 24 hours after vaccination
- If baby unwell or fever persists – parents should seek medical advice

Paracetamol (NOT Ibuprofen)

- Previously not recommended routinely
- Recent studies show **NO** evidence of a decrease in the immune response when paracetamol is given with the MenB vaccine and other PCI vaccines
- Recommendation supersedes PIL
- No increase in parental attendance if informed beforehand
- Not routinely given at the 12 month MenB vaccination (risk of fever is less)

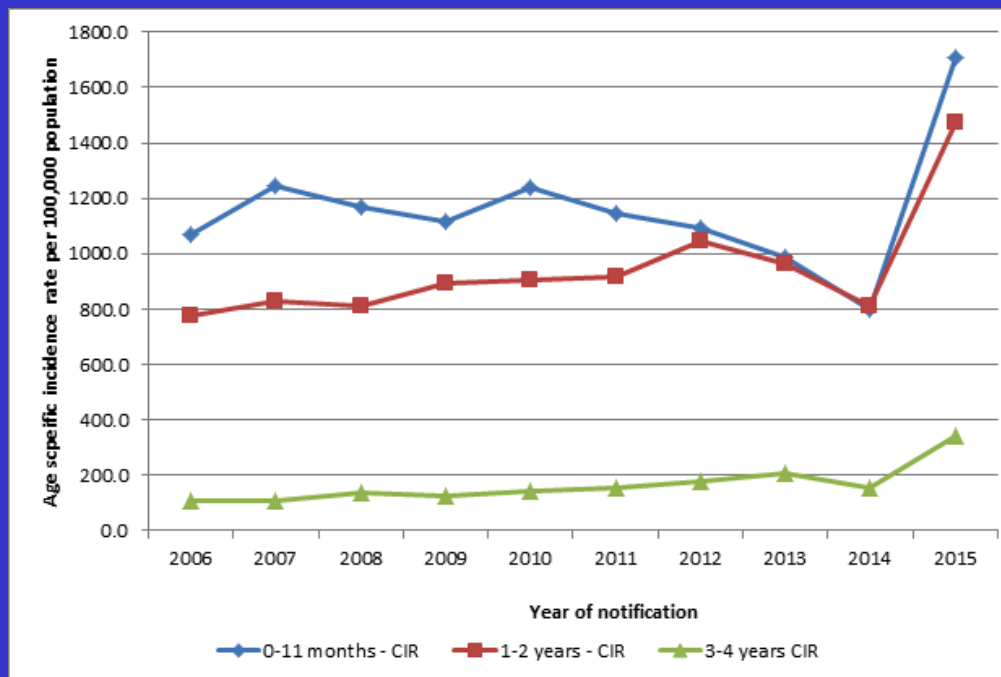


Rotavirus Disease

- Very common viral infection causing diarrhoea and vomiting
- ~ 2,400 cases notified in Ireland each year
- Most in under 1 year age group

Age specific incidence rate per 100,000 population of notified rotavirus cases

Source HPSC



Rotavirus Disease

- Estimated that all children infected with rotavirus by age 5
- Spreads very easily through hand to mouth contact and aerosol
- Symptoms
 - ~3-8 days
 - severe diarrhoea, stomach cramps, vomiting, dehydration a low-grade fever
- Most babies and children recover at home
- Every year
 - ~ 920 children aged 0-4 require hospital treatment
 - Average length of stay 5 days



Rotavirus Vaccine

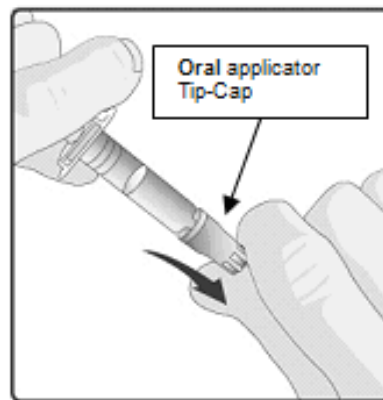
- Live attenuated ORAL vaccine
- Widely used routinely in Europe, UK, Australia and US
- Can be given with all other PCI vaccines
- Very effective (82-94%) in preventing rotavirus disease in young babies
- Reduces hospital admissions by ~ 70%
- Good safety profile and well tolerated in most babies



Rotavirus Vaccine

- Schedule
 - 2 doses at 2 and 4 months
- Give before injected vaccines

Instructions for administration of the vaccine:



1. Remove the protective tip cap from the oral applicator.



2. This vaccine is for oral administration only. The child should be seated in a reclining position. Administer orally (i.e. into the child's mouth, towards the inner cheek) the entire content of the oral applicator.

Rotavirus Vaccine

Contraindications/ Precautions

Contraindications

- Confirmed anaphylactic reaction to a previous dose of rotavirus vaccines or its constituents
- Severe Combined Immunodeficiency Disorder (SCID)
- Previous history of intussusception
- Malformation of the gastrointestinal tract (?lead to intussusception)
- Hereditary fructose intolerance, sucrose-isomaltase deficiency or glucose-galactose malabsorption

Precautions (defer until well)

- an acute febrile illness
- an acute vomiting or diarrhoea illness



Severe Combined Immunodeficiency Disorder (SCID)

- Rare inherited condition => highly susceptible to infections
- More common in babies in some Traveller families (predominantly but not exclusively from the South East)
- About 1 case every year
- If diagnosed at or shortly after birth can be successfully treated with a bone marrow transplant (in the UK)

Need to ask parents

- Are there any diseases in the baby's family that affect the immune system?
- Did anyone in either family need a bone marrow transplant as a baby?

If Yes => FBC required



Rotavirus Vaccine

Intussusception

- Very rare (approx 1 in 50,000 vaccinated babies)
- Intestinal prolapse leading to obstruction
- Most common in those aged 5months – 1year
- ~1 in 1000 babies will get this condition naturally
- Symptoms
 - severe abdominal pain
 - worsens with time, ‘draw’ legs up
 - may get blood in stools, vomiting
- Needs urgent hospital treatment



Rotavirus Vaccine Schedule

Two doses at 2 and 4 months of age

- Best protection if given on time
- Increased risk of intussusception with increased age
 - **No** doses after 8 months and 0 days
 - Minimum interval between dose 1 and 2 is 1 month
 - Latest time to start dose 1 is 7 months



Order and site of vaccines

- Give MenB first in LEFT leg
- Give 6 in 1 followed by PCV in RIGHT leg
- To monitor any local adverse reactions
- To give most painful last (PCV)



Hib/MenC vaccine

- Menitorix (GSK)
- Used in UK PCI schedule
- Single prefilled syringe and vial
- Requires reconstitution



Information materials

- Information materials for parents
 - Updated
 - maternity leaflet
 - 'Your child's immunisation - A guide for parents'
 - Magnet
 - Immunisation passport
 - New tear pad at 6 weeks
 - Updated
 - tear pad with after vaccine care
 - information on website

Before

NEXT APPOINTMENT

Immunisation Information

Babies born on or after 1 October 2016 are offered the vaccines in the table below.

Age

Vaccination

2
months

Visit 1

**6 in 1+PCV+MenB+Rotavirus
3 Injections+Oral Drops**

4
months

Visit 2

**6 in 1+MenB+Rotavirus
2 Injections+Oral Drops**

**3 6 in 1+PCV+MenC
3 Injections**

on or after 8 months 0 days

**4 MMR+MenB
2 Injections**

**5 Hib/MenC+PCV
2 Injections**

> (doctor)

Child's
Immunisation
Information for parents

For children
born on
or after
1 October
2016

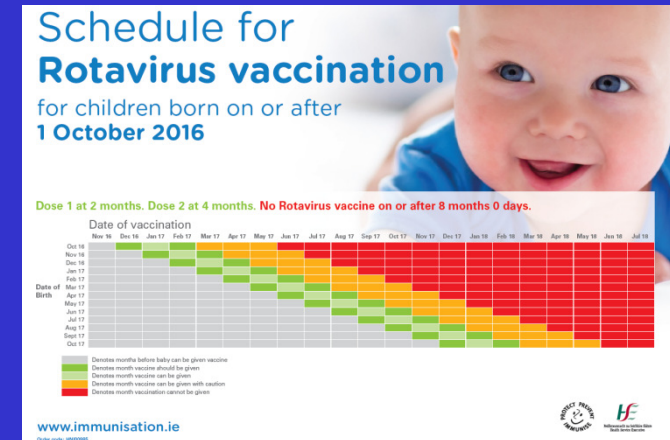
The logo for 'Protect Parents Immunise' features a circular emblem with a stylized figure and the text 'PROTECT PARENTS' at the top and 'IMMUNISE' at the bottom.

The logo for the Health Service Executive (HSE) features a stylized 'HSE' acronym and the text 'Health Service Executive' below it.

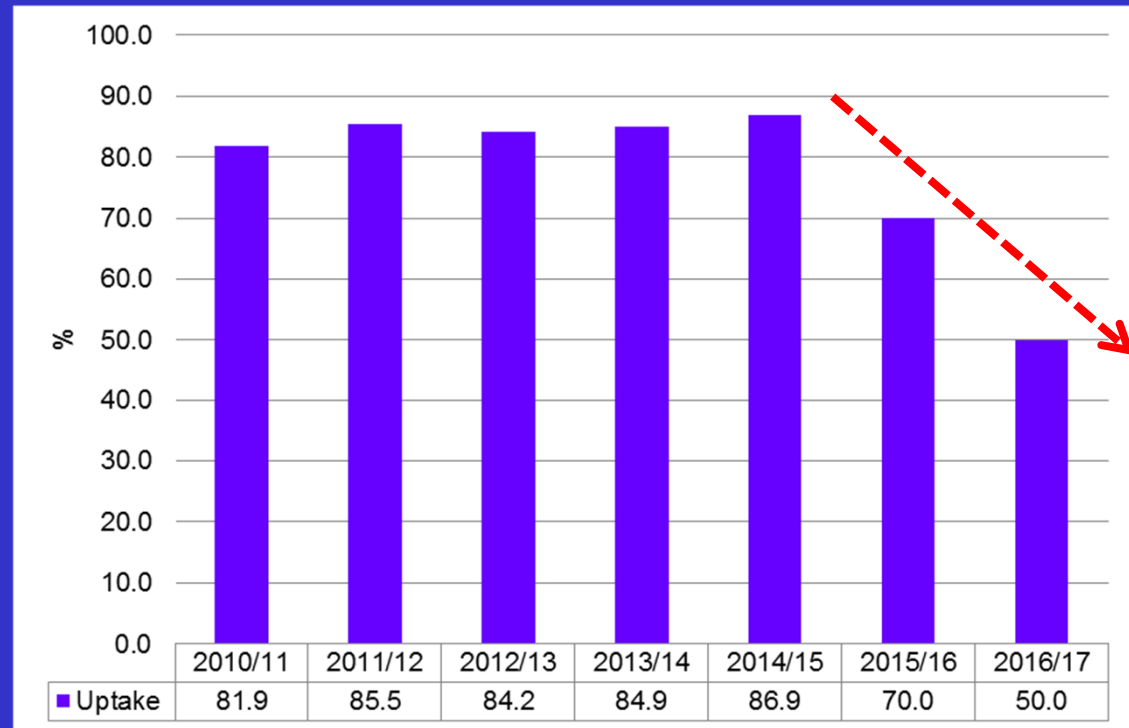


Information materials

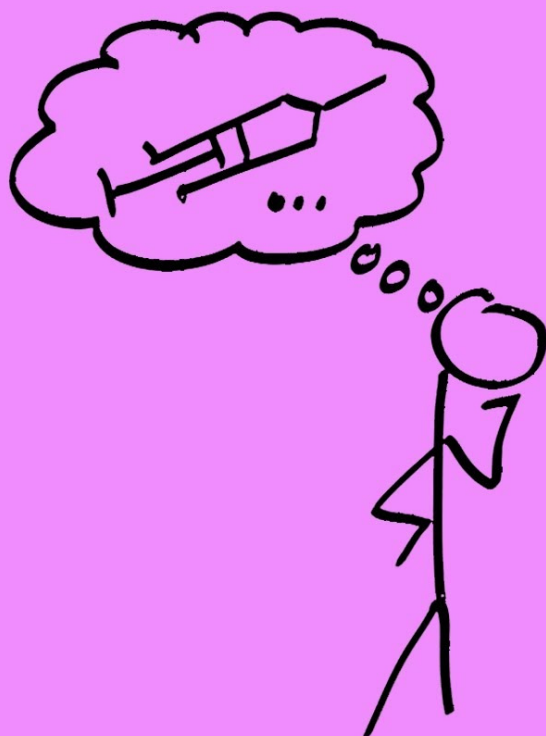
- Train the trainers day 18th May, Dublin
- Local roll out of training programme
- Information materials for health care professionals
 - Frequently Asked Questions document
 - Wheel for rotavirus vaccine doses and ages
 - Posters - new schedule, rotavirus schedule and paracetamol dosage
 - Updated
 - Guidelines for Vaccinations in General Practice
 - Immunisation Guidelines for Ireland (NIAC)
 - Updated information on website



HPV vaccine uptake 2010/2011 - 2016/2017



5000 more girls
not vaccinated
in 2015/16



ARE HPV VACCINES SAFE?

Reactions and Effects of Gardasil Resulting in Extreme Trauma

★ Home ★ Background ★ Victims ★ Research ★ Videos



R.E.G.R.E.T.

What needs to be done?

R.E.G.R.E.T.
Support Group
INAUGURAL MEETING,
SWORDS, 23/05/2015, 12 am.
PROPOSED STRUCTURE AND AGENDA.

12.00. INTRODUCTION.

AIMS OF THE GROUP:

- ~~X~~ TO GET THE GIRLS HEALTH BACK
- TO CREATE AWARENESS AMONG OTHER PARENTS OF THE POTENTIAL FOR SERIOUS REACTIONS
- TO SUPPORT THE GIRLS IN THEIR EFFORTS TO CONTINUE THEIR EDUCATION

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KERRY PARENTS CONTINUE CAMPAIGN ON HPV VACCINE



'We won't back off!'

A GROUP OF Kerry parents have vowed to continue a campaign to raise awareness on what they believe are the adverse effects of the HPV vaccine - given to young girls to protect them from developing cervical cancer.

BY SINEAD KELLEHER

Aengus O'Leary from Castlemaine, has been raising concerns in a campaign since their

Aengus O'Leary (left) and Don Myers with the HPV Vaccine leaflet they have produced.

"We are not anti-vaccine parents. We merely are trying to circulate information on the HPV Vaccine which parents are entitled to."

"We will not tell any parent to vaccinate their child

late any information that was not HSE related.

Last Friday, they met with Dr Kevin Kelleher, the assistant national director for public health with the HSE. "We met him as concerned

Join us on Facebook: [For Information here](#)

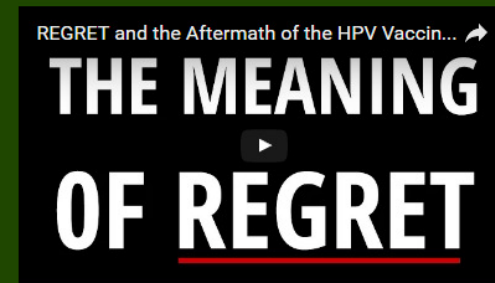
A Public Service Message from REGRET

HPV vaccination - Do you know the full facts? [31/08/2016]



REGRET GoFundMe campaign

[29/06/2016] [REGRET GoFundMe campaign](#) begins to help Irish families trying to cope with post-HPV vaccine illness. Tel +353894582901 for info



Cervical Cancer Vaccine - Is it safe? (Irish TV3 Documentary)

Four Irish families tell their stories about what getting the HPV Vaccine Gardasil has meant for them. TV3 documentary aired on 14/12/2015.



REGRET
@REGRET_ie

Swedish based WHO agency says more HPV/vax study needed 'given the medical seriousness of this safety concern' @ghook
link.springer.com/article/10.100

Drug Safety Current Sa...
A number o...
link.springer...

04 Oct

REGRET Retweeted

George Hook @ghook

I refuse to be labelled a scaremonger because I dare ask questions about the safety of HPV vaccine

04 Oct

REGRET Retweeted

92.5 Phoenix FM @925PhoenixFM

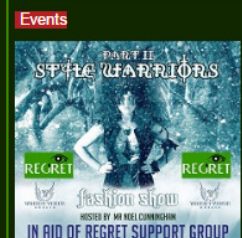
Last up on D15 Today, we have Anna Cannon @REGRET_ie is on to talk about the HPV vaccination. #D15Today

04 Oct

REGRET Retweeted

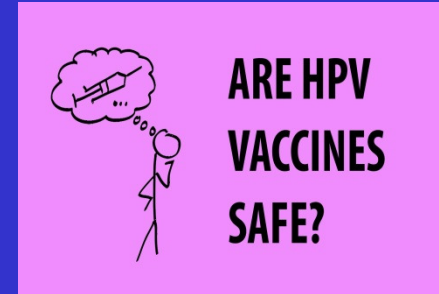
George Hook @ghook

Embed View on Twitter



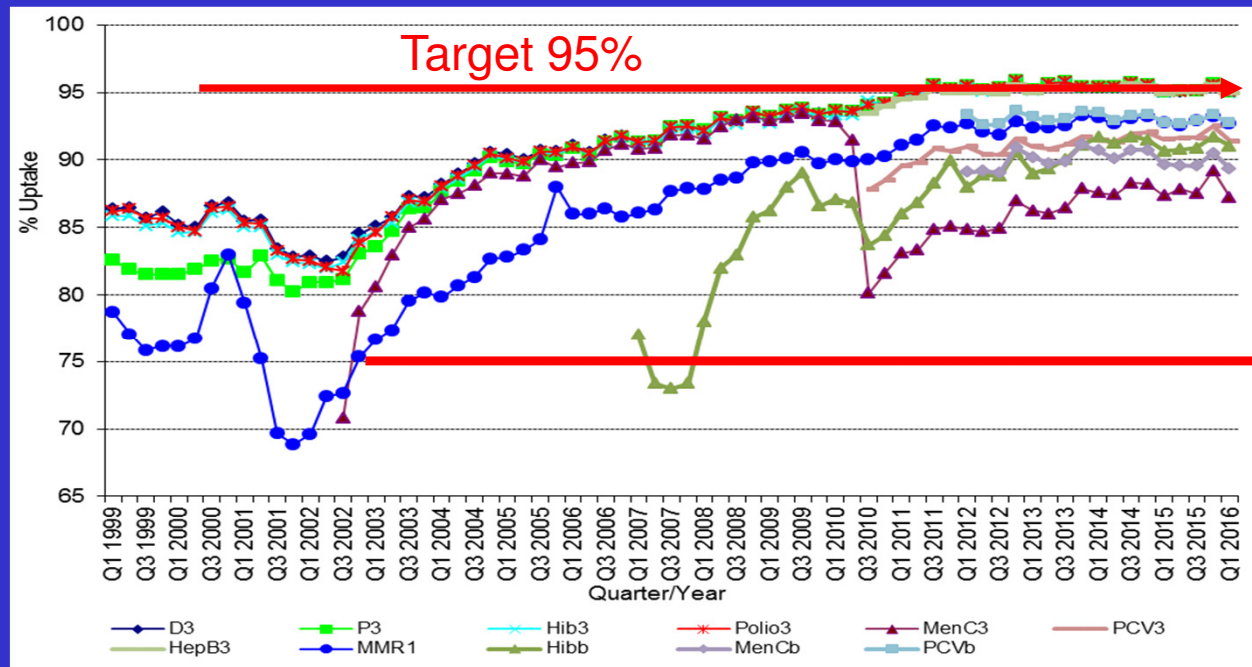
Reidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Concerns



- Vaccine safety
 - Vaccine safety
 - Vaccine safety
 - Vaccine causes serious side effects
-
- Lack of information
 - Consent process too rushed
 - Distrust in HSE – link to Pharma
 - Anti-establishment agenda

Vaccine uptake rate at 24 months 1999-2016



- 16 years
- Measles outbreaks
- Death and disability



Source: HPSC

HPV Vaccine Facts

Cervical Cancer in Ireland

- 6,500 women need hospital treatment pre-cancerous lesions
- > 280 (many young) women need treatment for invasive cancer
- 90 women die

Gardasil HPV vaccine prevents cancer developing

August 29th 2016 in Australia

- Professor Ian Frazer stated that after ten years of Gardasil HPV vaccine use *“the number of new cases of cervical cancer in women has halved”*

<http://www.sciencealert.com/the-hpv-vaccine-has-halved-cervical-cancer-rates-in-the-past-10-years>

Best way to prevent cervical cancer = HPV vaccination + cervical screening

- ➡ Vaccine prevents precancerous growths and cancer
- ➡ Screening detects pre cancer or cancer of the cervix



HPV Vaccine Facts

Gardasil HPV vaccine is a safe vaccine with NO known long term side effects

- The safety profile studied for >13 years in >1 million people during clinical trials and since the vaccine was licensed in 2006.
- No increase in the rates of any serious long term condition including autoimmune diseases and chronic fatigue syndrome in vaccinated girls.

An Overview of Quadrivalent Human Papillomavirus Vaccine Safety: 2006 to 2015, available at: <http://www.ncbi.nlm.nih.gov/pubmed/26107345>

- Since the programme started in 2010 to 30 September 2016 HPRA has received 1072 suspected adverse reactions/events
 - most of these reports are expected side effects
 - 14 - chronic fatigue syndrome
 - 10 - post viral fatigue
 - 3 - an auto immune condition

Much less than expected



Reidhmeannacht na Seirbhíse Sláinte
Health Service Executive

Chronic fatigue syndrome (CFS)

- known for over 200 years
- is 3-4 times more common in females and younger adolescents
- 10,000 cases in Ireland
- estimated prevalence rate in Ireland 0.2-0.4%
- 220,000 girls vaccinated (660,000 doses)
=> at least 440-880 cases expected

Reported numbers much lower than expected



Gardasil side effects

4. Possible side effects

Like all vaccines and medicines, Gardasil can cause side effects, although not everybody gets them.

The following side effects can be seen after the use of Gardasil:

Very commonly (more than 1 in 10 patients), side effects found at the injection site include: pain, swelling and redness. Headache was also seen.

Commonly (more than 1 in 100 patients), side effects found at the injection site include: bruising, itching, pain in extremity. Fever and nausea have also been reported.

Rarely (less than 1 in 1000 patients): hives (urticaria).

Very rarely (less than 1 in 10,000 patients), difficulty breathing (bronchospasm) has been reported.

When Gardasil was given with a combined diphtheria, tetanus, pertussis [acellular, component] and poliomyelitis [inactivated] booster vaccine during the same visit, there was more headache and injection-site swelling.

Side effects that have been reported during marketed use include:

Fainting, sometimes accompanied by shaking or stiffening, has been reported. Although fainting episodes are uncommon, patients should be observed for 15 minutes after they receive HPV vaccine.

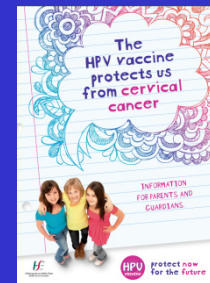
Allergic reactions that may include difficulty breathing, wheezing (bronchospasm), hives and rash have been reported. Some of these reactions have been severe.

As with other vaccines, side effects that have been reported during general use include: swollen glands (neck, armpit, or groin); muscle weakness, abnormal sensations, tingling in the arms, legs and upper body, or confusion (Guillain-Barré Syndrome, Acute disseminated encephalomyelitis); dizziness, vomiting, joint pain, aching muscles, unusual tiredness or weakness, chills, generally feeling unwell, bleeding or bruising more easily than normal, and skin infection at the injection site.

Side effects seen after use

=> Scientific evidence of causation

- pain, redness or swelling in the arm
- headache
- nausea
- a mild fever
- Itchy rash/ hives
- fainting
- serious allergic reactions very rare



Side effects reported during general use

=> No scientific evidence of causation



CDC

CDC has carefully studied the risks of HPV vaccination. HPV vaccination is recommended because the benefits, such as prevention of cancer, far outweigh the risks of possible side effects.

Benefits

Cancer Prevention

Cervical, vaginal, and vulvar cancer in women

Anal cancer in men and women

Likely penile cancer in men

Likely oropharyngeal cancer in women and men

Potential Risks

Chance of fainting

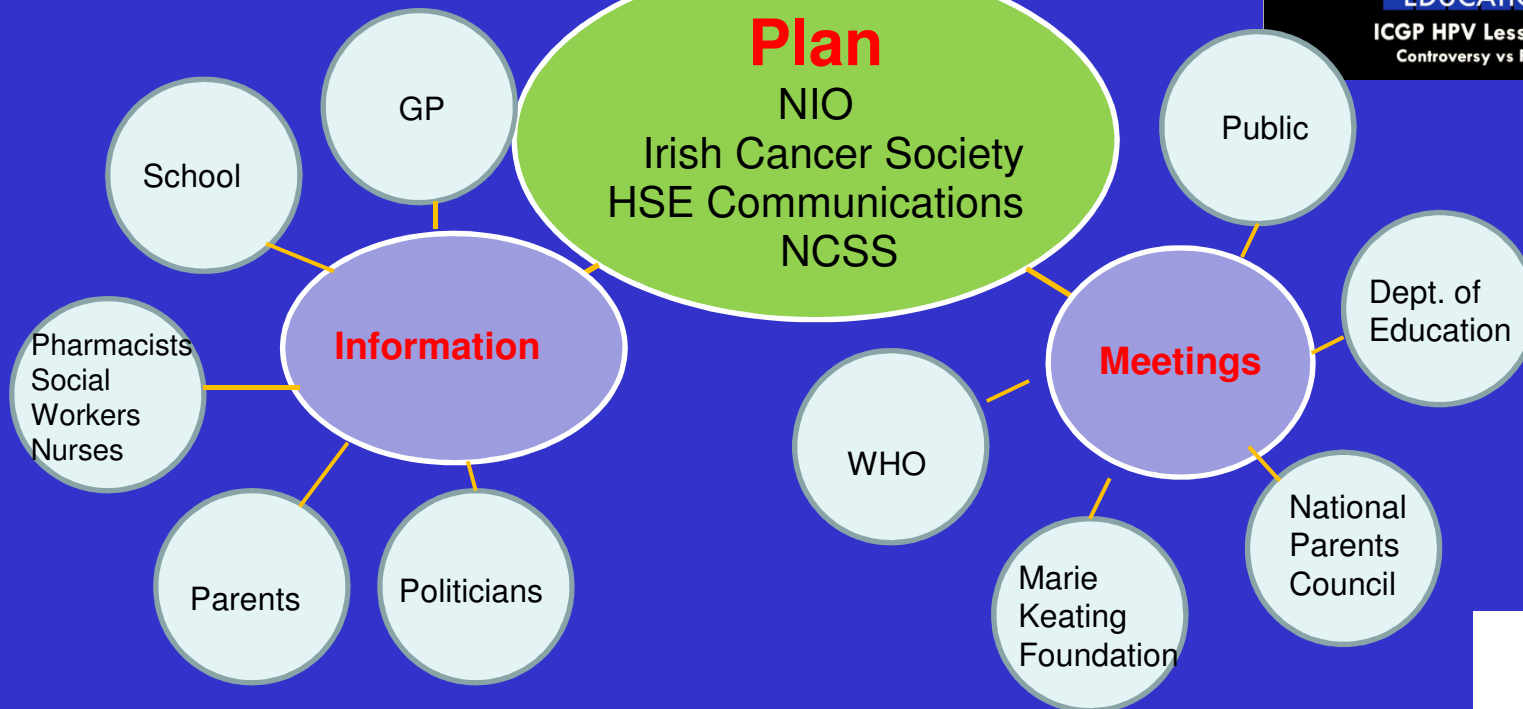
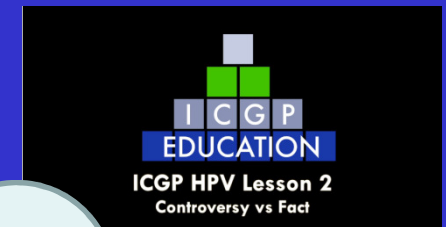
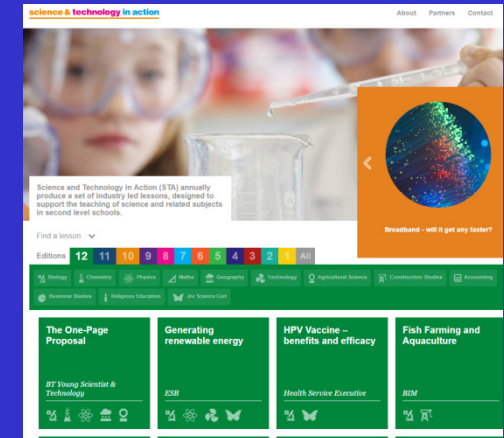
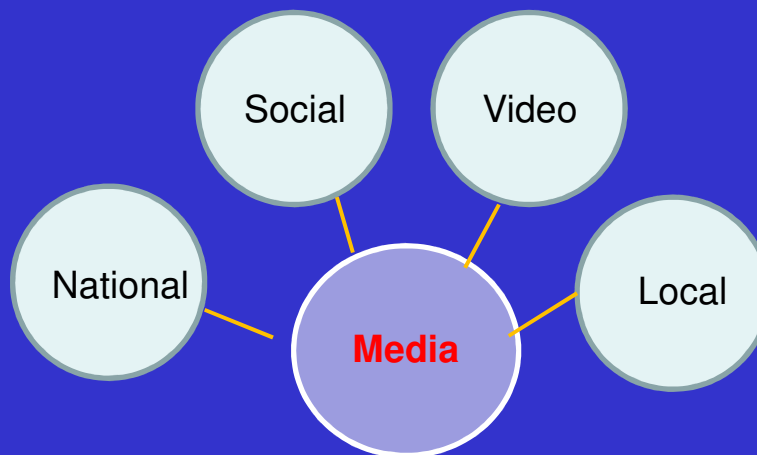
Pain, redness, or swelling in the arm where the shot was given

<http://www.cdc.gov/vaccinesafety/pdf/data-summary-hpv-gardasil-vaccine-is-safe.pdf>



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Actions



HPV vaccine information

HPV Vaccines and Cervical Cancer

Human papillomavirus (HPV)

- Human Papillomavirus (HPV) infection is spread by direct (usually sexual) contact with an infected person.
- About 80% of all women will have a HPV infection in their lifetime usually in their late teens and early 20s.
- Most HPV infections clear naturally but some caused by high risk HPV types can progress to cervical cancer.
- Two high risk HPV types (16 and 18) cause over 70% of cervical cancers.

Cervical cancer

- Ireland has one of the highest rates of cervical cancer in Western Europe.
- Each year in Ireland
 - over 90 women die from cancer
 - over 280 (many young) women need treatment (surgery, chemotherapy and radiotherapy) for invasive cervical cancer
 - over 6,500 women need treatment for a precancerous form of cervical cancer.

HPV vaccine

- There are three licensed HPV vaccines, HPV2, HPV4 and HPV9.
- HPV vaccine is recommended by the World Health Organization, the International Federation of Obstetricians and Gynaecologists and the expert immunisation in Ireland.
- The HPV vaccine used in the school HPV vaccination programme is HPV4 (Gardasil).
- Gardasil provides protection against
 - two high risk HPV types (16 and 18) that cause 70% of cervical cancers and precancers
 - two HPV types that cause genital warts.

- Gardasil has been licensed worldwide since 2006. Gardasil is currently used in over 25 European countries, the United States, Canada, Australia and New Zealand.
- By May 2016, over 220 million doses of Gardasil have been distributed worldwide, either as part of national immunisation programmes or by private doctors.
- In Ireland more than 660,000 doses of Gardasil have been distributed and more than 220,000 girls have received the full vaccine course as part of the HSE school HPV vaccination programme.

There is no scientific evidence of any long term side effects of HPV vaccines.

Do HPV vaccines work?

- HPV vaccines are more than 99% protective against infection with cancer causing HPV virus types.
- HPV vaccines are most effective when given at the age of 12 to 13 years and will provide protection throughout adulthood.
- Precancerous growths of the cervix have been reduced by more than 90%.

HPV Vaccine Key Facts

There is evidence that the recommendation of a known health professional leads to increased vaccine uptake. GPs and practice nurses provide a significant role in the promotion of all vaccines so please help to inform parents about the safety and effectiveness of HPV vaccine.

Human papillomavirus (HPV)

- Human Papillomavirus (HPV) infection is the most common sexually transmitted disease worldwide.
- Spread by direct (usually sexual) contact with an infected person.
- About 80% of all women will have a HPV infection in their lifetime usually in their late teens and early 20s.
- HPV infection rates are rising rapidly among women and men in high income countries.
- Most HPV infections clear naturally but some caused by high risk HPV types can progress to cervical cancer.
- Two high risk HPV types (16 and 18) cause over 70% of cervical cancers.

Cervical cancer

- Ireland has one of the highest rates of cervical cancer in Western Europe.
- Each year in Ireland
 - over 90 women die from cervical cancer
 - over 280 (many young) women need treatment (surgery, chemotherapy and/or radiotherapy) for invasive cervical cancer
 - over 6,500 women are diagnosed with high grade cervical intraepithelial neoplasia (CIN) and require hospital treatment.

Other cancers

- HPV is responsible for
 - more than 90% anal cancers
 - almost 70% vaginal and vulvar cancers
 - more than 60% of penile cancers
 - over 70% oropharyngeal cancers.
- Male incidence of oropharyngeal cancer will overtake cervical cancer incidence by 2020.

HPV vaccine is recommended by the World Health Organization (WHO), the International Federation of Obstetricians and Gynaecologists (FIGO) and the American Society for Clinical Oncology to reduce the burden of cervical cancer in women.

HPV Vaccine

- Should be administered before exposure to HPV at sexual contact.
- Recommended for all girls aged 12-13 years.
- HPV vaccine is known to be most effective when given at this age.
- Two HPV vaccines (HPV2 and HPV4) were licensed in 2006.
- HPV2 vaccine (Cervarix)
 - is licensed to prevent premalignant genital lesions and cervical cancer causally related to HPV types 16 and 18
 - is licensed for use in females from 9 years of age

- two dose schedule at 0 and 6 months for girls less than 15 years at first dose
- three dose schedule at 0, 1, 6 months for females age 15 to 26 years.
- HPV4 vaccine (Gardasil)
 - is used in the HSE HPV school vaccination programme
 - is licensed to prevent premalignant genital and anal lesions, cervical and anal cancers causally related to HPV types 16 and 18
 - provides protection against HPV types 6 and 11 that cause over 90% anogenital warts in men and women
 - is licensed for use in females and males from 9 years of age
 - two dose schedule at 0 and 6 months for those less than 15 years at first dose
 - three dose schedule at 0, 2, 6 months aged 15 to 26 years.

HPV types 16 and 18 cause 70% cervical cancers.

- HPV9 vaccine (Gardasil 9)
 - was licensed in 2014
 - provides protection against 9 HPV types 6, 11, 16, 18, 31, 33, 45, 52, and 58 (7 of which cause almost 90% of cervical cancers).

Website accredited by



HPV Vaccine Facts

Gardasil HPV vaccine is safe and effective and will prevent girls from developing cervical cancer in the future.

Many parents are reading and hearing lots of scare stories about HPV vaccine.

Please read the facts below or [download facts about HPV vaccine](#) (596KB)

FACT 1

Gardasil HPV vaccine prevents cancer developing.

Some HPV infections caused by high risk HPV types can progress to pre cancerous growths and some of these can progress to cervical cancer.

Gardasil HPV vaccine has been scientifically proven to prevent the HPV infection that causes 70% of cervical cancers.

In countries with high HPV vaccine uptake such as Australia and Scotland precancerous growths of the cervix have been reduced by more than 50%.

On August 29th 2016, Australian Professor Ian Frazer stated that after ten years of Gardasil HPV vaccine use "the number of new cases of cervical cancer in women has halved" in Australia

<http://www.sciencealert.com/the-hpv-vaccine-has-halved-cervical-cancer-rates-in-the-past-10-years>

Impact and Effectiveness of the Quadrivalent Human Papillomavirus Vaccine: A Systematic Review of 10 Years of Real - world Experience - on the benefits of the HPV vaccine is available at

Share:



Human Papillomavirus (HPV) Vaccine Information

September 2016

The human papillomavirus (HPV) vaccine protects girls from developing cervical cancer when they are adults.

The HSE has offered the HPV vaccine to all girls in first year in second level schools since 2010 to protect them from cervical cancer in adulthood. HPV vaccine is offered to this age group because the response to the vaccine is best at this age.

The vaccine is recommended by

- the World Health Organization
- the International Federation of Obstetricians and Gynaecologists
- the National Immunisation Advisory Committee

The HPV vaccine is available free of charge from the HSE for all girls in 1st year of second level school.

The vaccine is given through a school based programme, to ensure high vaccine uptake. However, in specific instances some girls will be invited to special HSE clinics for their vaccine.

The HSE will let you know the date the school immunisation team will attend your daughter's school to give the HPV vaccine. If a student misses the vaccine in school, the HSE will arrange for the student to be vaccinated at a HSE clinic.

To read more about HPV please visit the following pages

- [HPV and cervical cancer](#)
- [HPV vaccine](#)
- [HPV vaccination programme](#)
- [HPV vaccine safety](#)
- [HPV vaccine facts](#)
- [HPV Information Materials](#)

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Why is HPV Vaccine Important?



Each year in Ireland, over 6,500 women need hospital treatment for pre cancer of the cervix, 300 women get cervical cancer, and 90 women die from it. Cervical Cancer is caused by HPV.

HPV vaccine protects against 7 out of 10 cervical cancers.

We are offering the vaccine to girls in first year because the vaccine works best when given at this age. The vaccine will protect the girls before adulthood and the

fection with the HPV virus types 6, 11, 16 and 18 for at least 9

s expected to provide life time protection from these viruses the vaccination.

[fsm](#)

side effects of Gardasil HPV vaccine.

injection site, headache, fever, nausea,

ely bronchospasm".

1 in every million cases. This is treated by an injection.

cured after vaccination. These conditions have not been



www.immunisation.ie
www.hpv.ie



Reidhmeannacht na Seirbhíse Sláinte
Health Service Executive



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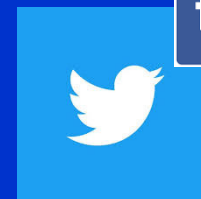
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Key points

- New PCI schedule for babies born on or after October 1st 2016
- 3 doses of infant paracetamol at and after 2 and 4 month Men B vaccines to reduce fever
- No dose of rotavirus after 8 months
- Concerted actions needed to overcome HPV vaccine safety concerns and prevent cervical cancer

